

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN  
MILWAUKEE DIVISION

-----

ESTATE OF JAMES FRANKLIN PERRY	)	
by NATHANIAL CADE, JR.,	)	
Special Administrator, and	)	
JFP, Jr.,	)	
	)	
Plaintiffs,	)	Case No. 12-CV-664
	)	
vs.	)	
	)	
RICHARD LOPEZ, et al.,	)	March 25, 2019
	)	8:30 a.m.
Defendants.	)	

-----

**EXCERPT TRANSCRIPT OF JURY TRIAL**

BEFORE THE HONORABLE J. P. STADTMUELLER

UNITED STATES DISTRICT JUDGE

Official Court Reporter:  
Richard Derrick Ehrlich, RMR, CRR  
richard\_ehrlich@wied.uscourts.gov  
(414) 290-2642

Proceedings reported by stenotype.  
Transcript produced by computer-aided transcription.

## A P P E A R A N C E S

For the Plaintiffs:

James J. Gende, II  
Gende Law Offices, SC  
N28 W23000 Roundy Drive  
Suite 200  
Pewaukee, WI 53072  
262.970.8500  
jgende@jamesgendelaw.com

Christopher P. Katers  
Judge Lang & Katers, LLC  
8112 W. Bluemound Road  
Suite 101  
Wauwatosa, WI 53213  
414.777.0778  
ckaters@jlk-law.com

For the City of Milwaukee:

Susan E. Lappen  
200 East Wells Street  
Room 800  
Milwaukee, WI 53202  
414.286.2601  
slappe@milwaukee.gov

1 MS. LAPPEN: Good morning. I would like to start  
2 by saying that the loss of a loved one is a tragic and  
3 terrible thing to go through, and on behalf of the officers  
4 and myself, I want to extend nothing more but respect to the  
5 family members and our deepest sympathies; however, in this  
6 particular case, I'm representing 11 police officers who are  
7 being accused of disregarding Mr. Perry and doing nothing,  
8 and that caused his death as counsel has indicated.

9 We anticipate that the evidence that's presented  
10 to you in this case will provide you with the following  
11 information: Mr. Perry was taken into custody by police  
12 officers in the early morning hours of that day. They had a  
13 report of a woman whose car was stolen at gunpoint. A car  
14 matching the description of the stolen car was observed by  
15 officers and pulled over. Mr. Perry was driving that car.

16 In the course of the stop, they found the woman's  
17 purse and cell phone on the front seat next to Mr. Perry.

18 In the course of speaking with him, Mr. Perry  
19 admitted that he had taken that vehicle from the woman at  
20 the original scene of the event that led to the call for  
21 police assistance.

22 Mr. Perry was booked in, which is a process  
23 whereby he was brought into the downtown police  
24 administration facility jail. It's a temporary holding  
25 facility. He was brought in and booked. And in the process

1 of being booked, which is fingerprinted and photographed,  
2 Mr. Perry, like any other prisoner, was asked a series of  
3 medical screening questions to give the officers an idea if  
4 there was an imminent need for any type of medical care.  
5 The evidence, or information, will indicate that, yes, he  
6 had indicated to the screening officer that he did suffer  
7 from seizures and he took seizure medication. The evidence  
8 will also indicate that he did not ask for seizure  
9 medication. He did not indicate that he was having any  
10 issue with regard to his epilepsy or seizure condition.

11 The evidence will show that Mr. Perry was  
12 maintained at the PPS facility. Again, it's a temporary  
13 holding facility.

14 You will learn that prisoners who are taken into  
15 custody in the context of a police investigation are kept at  
16 that location. Again, it's at 7<sup>th</sup> Street -- roughly 7<sup>th</sup> and  
17 State in the City of Milwaukee because that is also where  
18 the main detective bureau is located. So having a prisoner  
19 who is taken into custody while there's an ongoing  
20 investigation, they will be kept at that facility until the  
21 detectives feel that they no longer need to question that  
22 person or perhaps have that person participate in a lineup  
23 whereby the victims of crimes are brought in and asked to  
24 view people and determine if that person is, in fact, the  
25 person that, you know, committed the crime. So people are

1 kept there. It's not a long-term facility. They're not  
2 kept there for long periods of time, but it's a temporary  
3 holding facility.

4 So Mr. Perry was kept at this facility. The  
5 evidence will show that at about 11:00 in the morning, he  
6 was removed from what they call the male bullpen. It's a  
7 very large room with benches and a toilet, and it's a room  
8 where prisoners are kept while they're in the process of  
9 being interviewed or while the investigation is ongoing.

10 In any event, Mr. Perry was removed from the  
11 bullpen at about 11:00, 11:15 in the morning. He was  
12 questioned by an investigating detective relative to his  
13 involvement in the underlying incident that led to his being  
14 taken into custody earlier in the morning.

15 The detective will testify that at no time during  
16 that roughly 45 minutes did Mr. Perry indicate he was having  
17 any issue, medical or otherwise. I believe the detective  
18 offered and got him a soda or Coke, something like that, to  
19 drink while they were conducting the interview. And,  
20 subsequently, the detective put Mr. Perry back into the  
21 bullpen until he was wrapping up his investigation.

22 There was an ongoing investigation relative to  
23 some other issues. Mr. Perry apparently was in the company  
24 of another man; that other man struck the woman, who had a  
25 car stolen, with a pistol. And there were a lot of players

1 and information that they're going through, but, ultimately,  
2 they would be moving Mr. Perry, they knew, to the criminal  
3 justice facility.

4 The criminal justice facility is literally located  
5 about a block from the downtown PPS, the city jail, and that  
6 is where prisoners are brought for longer term  
7 incarceration. So they all knew that that is ultimately  
8 where Mr. Perry would be brought.

9 About 2:30 or so in the afternoon, the evidence  
10 will show you that Mr. Perry did suffer a seizure while he  
11 was in that bullpen area; that as soon as officers observed  
12 that, an ambulance was called. Paramedics arrived. They  
13 provided care to Mr. Perry. He acknowledged that he did  
14 suffer from seizures. He was what they call postictal. So  
15 after he had the seizure, he had this affect of being  
16 sluggish and tired, but he could respond to questions  
17 appropriately. He knew his name. He knew the date. He  
18 knew he could answer those basic questions. So he was  
19 conscious, talking, and aware. And the paramedics took  
20 Mr. Perry to Sinai Samaritan Hospital, which was a couple of  
21 blocks from the city jail downtown.

22 The evidence will show -- and we'll have the  
23 treating practitioner; so the two docs that treated him at  
24 the hospital.

25 We'll have a video of the nurse that was his

1 primary caregiver, and, of course, Officers Kroes and Jacks,  
2 who were the transporting officers. They will testify that  
3 while Mr. Perry was at the Sinai Samaritan emergency room,  
4 he sustained two additional significant seizures, one  
5 lasting over five minutes long. While he was there, when he  
6 first arrived, the initial treating doctor will indicate  
7 that what he did was he had ordered up some medication --  
8 it's called Dilantin -- which is a very commonly used  
9 medication to treat seizure activity; that he had ordered up  
10 some Dilantin for Mr. Perry, but he also had blood drawn  
11 because he wanted to find out if there was any of  
12 Mr. Perry's medication already existing in his bloodstream.  
13 He didn't want to give him more than what was necessary for  
14 treatment.

15 While the toxicology of the blood test results  
16 were coming back, Mr. Seizure -- Mr. Perry sustained one of  
17 his additional seizures. He was given a dose of what is  
18 called Ativan. That is a medication that they give to  
19 people who are in the course of having a seizure, and the  
20 purpose of giving him that medication is to reduce the  
21 affects of the seizure. So he was given this Ativan. Then  
22 they were going to give him intravenously the Dilantin.

23 What they learned from the blood test results was  
24 that Mr. Perry did have some of his Dilantin, some of his  
25 own anti-seizure medication still in his bloodstream. So

1 then Dr. Coogan, who was his treating practitioner, reduced  
2 the amount that he ordered Mr. Perry to be given from 1 gram  
3 to 750 milligrams; reduced it by about a quarter.

4 While the nurses were attempting to put that  
5 medication into Mr. Perry's system intravenously, they had a  
6 flareup. Apparently the vein got enlarged, what they call  
7 it being infiltrated. So they could not successfully get  
8 that medication into him. They had to try some different  
9 veins, some different things. But, ultimately, they did get  
10 the IV into Mr. Perry. They did give him the full dose that  
11 the doctor had ordered of the Dilantin.

12 Mr. Perry had a second seizure; this one lasting  
13 about five minutes long. He got a second dose of Ativan  
14 with regard to that second seizure.

15 So all told, during the three hours that Mr. Perry  
16 was at the hospital, he sustained two additional significant  
17 seizures, and he was given three different doses of  
18 anti-seizure medication.

19 Dr. Coogan will indicate that those medications  
20 can have a cumulative -- I can't say the word. An effect  
21 where the total of the three is greater than the sum. So,  
22 in other words, the cumulative effect -- there you go -- and  
23 that anticipated effects of that medication would be that  
24 the person would be very sleepy, sluggish, and have that  
25 type of physical responses. There would be relaxing of



1 musculature in the body.

2           The evidence will tell you that when Mr. Perry had  
3 his last of the medication into his system -- this was about  
4 5:45 in the evening -- Officer Kroes and Officer Jacks were  
5 told that he was ready to be released. They were a little  
6 concerned because of the fact that when Mr. Perry came into  
7 the facility, he was able to answer their questions. He  
8 appeared to understand what they were saying to him. He  
9 could walk on his own pretty well. Now they had a man in  
10 his hospital room who was having difficulty walking. They  
11 walked with him to the bathroom, one officer on each side,  
12 because he was very wobbly.

13           When they were speaking with him, he was drooling.  
14 They were talking to him, and it didn't seem to the officers  
15 like he was understanding fully what it was they were asking  
16 him about, so they raised these concerns to the nurse and  
17 said, "Hey, are you sure this guy is ready to go?"

18           And the nurse left and came back and gave them  
19 information indicating that, yes, what they were seeing was  
20 Mr. Perry under the influence of this medication, that he  
21 was fine, that he could stay in the ER another hour or so  
22 just to make sure there wasn't any kind of adverse reaction  
23 to the medication going on, then the doctor was releasing  
24 him. He would be released to go.

25           In the meantime, Dr. Coogan had left for the

1 night. Dr. Jahnke became the treating practitioner. She  
2 came into the hospital and into the sequence of events at  
3 about the time Mr. Perry was getting the last of the  
4 Dilantin into his system.

5 Dr. Jahnke will indicate that she did not  
6 physically touch Mr. Perry. She did not speak with him.  
7 She will indicate that she did receive information from  
8 Dr. Coogan about his status; that Dr. Coogan told her that  
9 once Mr. Perry got this medication, he would be free to be  
10 released from the hospital back into the officers' custody.  
11 And she will indicate that she did see Mr. Perry in the  
12 emergency room area as he was walking to the restroom, and  
13 she could see that Mr. Perry was wobbling, and that there  
14 was an officer on each side arguably helping him to walk in  
15 a more controlled fashion, but that will be the extent of  
16 her testimony.

17 In any event, the officers were still somewhat  
18 concerned for Mr. Perry. They called Lieutenant Robbins,  
19 their supervisor. They indicated, "Hey, you know, he was in  
20 this condition when we brought him in. He's been treated  
21 and medicated. Now we see him in this state. What should  
22 we do?"

23 And Lieutenant Robbins indicated, "Well, if the  
24 doctor has released him, you can rely on that information.  
25 Bring him back to PPS. We'll finish his paperwork, and then

1 we'll bring him to CJF."

2 So that is what the officers did. It took about a  
3 couple of minutes to get from the hospital back to the city  
4 jail, the PPS building.

5 When they got there, Mr. Perry was resistive to  
6 getting out of the squad car. He was somewhat kicking, not  
7 responding to what the officers were telling him. The  
8 officers then notified their supervisor of this, and two  
9 additional officers were called to help, Officers Bungert  
10 and Santiago.

11 So they met Officers Kroes and Jacks in the  
12 garage, which is on the main floor of the city jail  
13 building; and, ultimately, they had to assist Mr. Perry for  
14 his security and safety. For their own security and safety,  
15 they essentially carried him into the elevator so that he  
16 wouldn't kick, he wouldn't resist.

17 All the officers, believing that he was a man who  
18 had just been medically cleared from the hospital, that he  
19 was under the influence of anti-seizure medication, that he  
20 had sustained several seizures that day, and they accounted  
21 for that as being a cause behind the behaviors that they  
22 were observing.

23 The officers will tell you that they received  
24 first responder training. So our police officers are not  
25 medical doctors. They do receive a basic CPR training so

1 they can operate an AED, or the -- you know, the device used  
2 to shock an individual's heart. They have that basic first  
3 responder training. They are trained that when they observe  
4 something that appears to be medical going on in their  
5 presence with a prisoner, with a citizen, with a coworker,  
6 that they should -- first of all, if it seems to be an  
7 emergency call for help, then assist the person the best  
8 that they can until more advanced medical practitioners like  
9 EMTs or paramedics arrive on the scene.

10 They will indicate that with regard to what they  
11 observed with Mr. Perry from the point in time that he got  
12 out of the hospital and was medically cleared to the point  
13 in time when he was being brought up to the PPS, they didn't  
14 observe anything which indicated to them that he was  
15 experiencing a medical emergency. What they observed was  
16 someone who they thought was under the influence of  
17 medication, and, again, suffering from the aftereffects of  
18 seizure activity.

19 So they brought him upstairs. You will see  
20 videotape of that. You will see video images of the  
21 officers bringing him down a hallway, keeping him at the end  
22 of the hallway.

23 They indicated that they -- or will indicate that  
24 they sat him on the floor because they were concerned --  
25 earlier in the day, when he was in the bullpen and had a

1 seizure, he had fallen off a bench, and one of the inmates  
2 had reported that he thought Mr. Perry had hit his head. So  
3 they didn't want that to happen again, so they sat him on  
4 the floor.

5 They will indicate to you that they stood around  
6 him, they held him upright, that he wanted to go over to the  
7 floor. It was like he wanted to go to sleep or lay down.  
8 They wanted to keep him upright. They wanted him to breathe  
9 well. They wanted his diaphragm to be open and upright.  
10 They were talking with him trying to calm him while  
11 decisions were being made by Lieutenant Robbins and other  
12 jail staff as to what cell to put him in and how he would be  
13 processed further.

14 While he was seated on the floor, Mr. Perry, who  
15 had been drooling at the hospital, did begin to spit. The  
16 officers will tell you that they are trained relative to  
17 being aware of biohazards, of bloodborne pathogens.

18 In response to a prisoner spitting, they get a  
19 paper towel, like a mesh spit mask, and put it over him.  
20 They did that with Mr. Perry. They could see him through  
21 the mesh. And, yes, there was mesh, but they could see him.  
22 They could see his chest rising. They could hear him. He  
23 was talking with them. He was answering their questions and  
24 so forth. But they put the spit mask on, not to be  
25 inhumane, not to punish him. It was just simply a biohazard

1 protection for anyone who would be either transporting or  
2 touching or interacting with Mr. Perry while he was there.

3 While he was on the floor, yes, there was this  
4 point in time when he did say, "I can't breathe." It was  
5 shortly after this paper and mesh spit mask was put over his  
6 head. And the officers will indicate to you that is a  
7 common response from people when they get the spit mask over  
8 their head. But the officers reassured him, "No, if you're  
9 talking, you're breathing," which is something they had  
10 learned through their EMS training. And not once again did  
11 Mr. Perry complain about having difficulty breathing. Not  
12 once did they -- in this whole course of events did they  
13 observe that Mr. Perry appeared to be using his muscles on  
14 his neck or his shoulders or chest in order to breathe. He  
15 appeared to be breathing normally. So they didn't conclude  
16 that there was anything wrong with his breathing. They  
17 didn't conclude that there was anything else going on. They  
18 will tell you that there was no complaint of chest pain, of  
19 arm pain. They did not observe a drooping face during the  
20 point in time when Mr. Perry's face was unobstructed.

21 So, in any event, ultimately, he was put in cell  
22 A3. He was put in that cell because it doesn't have a bench  
23 from which he could fall. They moved him into that cell  
24 block area.

25 The officers will tell you that they did not drop

1 him. They carried him in a seated position with his body  
2 and torso upright and perpendicular to the floor and his  
3 butt and legs parallel to the floor. He may have been put  
4 down on his butt while they were opening the door before  
5 they carried him in, but he was not dropped. And in the  
6 process of moving him from the spot in the hallway to his  
7 jail cell, you will learn that primarily Officer Kroes,  
8 Officer Jacks, Officer Santiago, and Officer Bungert had  
9 assisted with carrying him. As they were walking along the  
10 hallway, Officer Lee saw they were carrying this man. He  
11 came in and helped with the carrying process.

12           You will see from the videos that Lieutenant  
13 Robbins was present. He was watching what was going on. He  
14 was working in his office trying to expedite Mr. Perry being  
15 brought to the county facility. He knew that Mr. Perry had  
16 been at the hospital. He knew he had seizures, but  
17 Lieutenant Robbins will tell you that he also knew that  
18 there were trained nurses who were employed at the county at  
19 the CJF. The city jail does not have medical staff. So he  
20 knew that if he could process him, get his paperwork  
21 together, once he got to the CJF, if Mr. Perry needed more  
22 medication, if he was having an adverse reaction down the  
23 road, it would be good for him to be there because, again,  
24 there were trained people there.

25           So Officer Diaz-Berg, Officer Ayala were both

1 assigned to the jail. They will indicate to you that,  
2 ultimately, after about an hour, the paperwork was located.  
3 They were ready to transport him. And then Officer Salinsky  
4 and Lopez were assigned to do the transport.

5 Could we put up photograph 1137B?

6 So you will see videotape. There's some from the  
7 hallway. There's some video cameras that were in some of  
8 the rooms along the way. There was a video camera that was  
9 located in the elevator, and we took some stills from that  
10 video. And the photo that I'm going to have brought up is a  
11 photo of Mr. Perry as he's on his way to the CJF.

12 So he had been medically cleared at Sinai. He had  
13 been brought back to the city jail. He was kept in a cell  
14 for about an hour and 15 minutes while the paperwork was  
15 completed. This is Mr. Perry at that point in time. So  
16 he's a couple minutes away from being brought to the CJF.

17 As you can see, and the officers will describe for  
18 you, he is wearing the spit mask. The blocking material is  
19 like a paper towel-like material. It is not wet. It is not  
20 saturated. Mr. Perry's face can be seen in the mesh. He is  
21 breathing. He is standing. He is bearing his own weight.

22 Yes, officers were assisting him. Officer Ayala  
23 and Officer Lopez were helping him on either side, and  
24 Officer Salinsky was helping him to the rear. Mr. Perry had  
25 these oversized pants that some men wear, and the officer



1 was concerned that they would fall down and he would trip on  
2 them. So Officer Salinsky was actually holding up his  
3 blue jeans to keep them from falling down so he could walk  
4 easily.

5 But this is a photo. There's no blood on his  
6 shirt; no staining on his shirt. There is no feces on the  
7 exterior of his clothing; no feces on his spit mask. And so  
8 Officer Ayala and Officer Diaz-Berg, who were present when  
9 Mr. Perry came in and were present when he was being  
10 transferred, will tell you that he actually appeared to get  
11 better. It seemed to them that the affects of the  
12 medication were wearing off because while he had to be  
13 carried in to the PPS, he was walking out.

14 After he was brought down through the elevator,  
15 Mr. Perry was then transported over to the CJF. Again, it's  
16 literally, like, a block, block-and-a-half from the PPS. It  
17 took maybe a minute or two to drive over there.

18 The officers will tell you that when they got  
19 there, they pulled into the sally port, which is, like, this  
20 parking area for the entranceway to the jail facility. And  
21 they parked. They got out. They removed Mr. Perry.

22 Officer Salinsky will tell you that during  
23 transport, there was a big plexi window. He could look  
24 through that window. He was seated in the front passenger  
25 seat. He was looking through the window and monitoring

1 Mr. Perry visually for the whole ride. Officer Lopez was  
2 driving. And they will tell you that when they got there,  
3 deputy sheriffs came and helped them remove Mr. Perry from  
4 the vehicle. Again, a concern in a law enforcement setting,  
5 as was throughout this course of events, is security and  
6 safety for everyone. So other officers came to help.

7 You will see video, other video, from the jail  
8 facility that shows when Mr. Perry walks through the  
9 entranceway, he is carrying his own weight. He's taking  
10 steps.

11 After he comes through the facility a few steps,  
12 you will see that his knees buckle. When his knees buckle,  
13 the officers bring him over to the nurse's station, and they  
14 get the nurses involved with evaluating him.

15 The officers will tell you that at no time -- and  
16 this is all of the 11 officers -- at no time did they  
17 believe during any event that day, after Mr. Perry was  
18 medically cleared and released from the hospital, that he  
19 was suffering from a medical emergency.

20 They will tell that you at no time did they think  
21 that there was anything going on which necessitated them to  
22 call an ambulance or get him back to the hospital. What  
23 they perceived was they were dealing with somebody who,  
24 again, was dealing with aftereffects of seizure activity  
25 that day and seizure medication.

1           They will tell you that their training provided  
2           that if there was an emergency, something like a seizure, a  
3           heart attack, a stroke, obvious shock, obvious allergic  
4           reaction, they would call an ambulance. That's not a  
5           problem; in fact, they had done that earlier in the day for  
6           Mr. Perry. But at no time after he was medically cleared  
7           from the hospital did they perceive that he was in need of  
8           emergency medical care.

9           You will see a videotape from a now-deceased  
10          deputy sheriff, Deputy Kleckbush. She will testify that  
11          when Mr. Perry came into the facility, she, a trained law  
12          enforcement officer, did not perceive that he was suffering  
13          from a medical emergency.

14          The two nurses who treated Mr. Perry --  
15          Nurse Virgo and Nurse Wenzel -- will tell you when he first  
16          came in, they thought that, yeah, he should probably go back  
17          to the hospital to be checked out because they felt  
18          uncomfortable about what he was presenting, because by then  
19          his knees had buckled. He was not responding to their  
20          questions verbally. When they asked his name, he nodded.  
21          When he was asked if he had seizures, he nodded. But they  
22          were concerned. They will tell you that even at that point,  
23          they did not believe that he was suffering from a medical  
24          emergency. It was only until Nurse Wenzel, after he had  
25          been in the facility for several minutes, she had his mask

1 removed, and she wanted to wipe his face because by then,  
2 they had noted some kind of frothy sputum. And in wiping  
3 his face, she had eye contact with him, and suddenly his  
4 eyes rolled back, and he became unresponsive. And, at that  
5 point, she believed a medical emergency was occurring.

6 By then, though, an ambulance had already been  
7 called to transfer Mr. Perry back to the hospital. But they  
8 will tell you, again, trained medical professionals, that  
9 even they did not believe that Mr. Perry, when he came in  
10 the CJF building, was experiencing a medical emergency which  
11 required an ambulance to come and transport him to the  
12 hospital, get him more advanced medical care.

13 You will hear from other witnesses. You'll hear  
14 from Mr. Puechner, who was a retired janitor at the jail  
15 facility, that when he was doing his janitorial duties,  
16 Mr. Perry was in his cell. And at one point in time,  
17 Mr. Perry had put his face to the opening in the cell door  
18 and asked him what time it was.

19 So he will tell you that while Mr. Perry was in  
20 PPS, he had talked to him and asked him about the time and  
21 appeared to be fine.

22 You will hear from a variety of other witnesses  
23 and whatnot, but I think I provided you with essentially a  
24 roadmap to follow as we present the witnesses to you  
25 throughout the course of this trial.

1           So, again, it's the position of the officers that,  
2           yes, the loss of life is tragic, and it's regrettable, and  
3           they have sympathy for the family. But in this particular  
4           set of circumstances, we will present to you witnesses and  
5           evidence which establishes that when they were interacting  
6           with Mr. Perry along the course of his processing that day,  
7           that once he had been medically cleared at the hospital,  
8           they believed that he was simply under the affects of  
9           medication. It's much like if they would have somebody who  
10          was intoxicated. You know the person is drunk. You know  
11          that they're walking awkwardly, slurring their speech, maybe  
12          spitting or drooling, but officers would have a belief, a  
13          reasonable belief that eventually that alcohol is going to  
14          wear off and the person is going to get better. It was the  
15          same perspective with regard to Mr. Perry. They felt that  
16          he was under the influence of these medications. And as  
17          you'll see from the video information, including the still  
18          that we have in front of us here, by the time he was  
19          transported from the prisoner processing section to the CJF,  
20          he was carrying his own weight. He was standing. There was  
21          no evidence of any kind of spit or blood or vomit or  
22          anything on his face, facial mask, nothing on the exterior  
23          of his clothing. And, in fact, they felt that he was, as I  
24          said earlier, getting better; that the affects of the  
25          medication were wearing off and that he was fine to

1 transport to the criminal justice facility.

2 I thank you for your attention.

3 As the judge indicated, because we're the Defense,  
4 we present our evidence second. So I ask that you keep an  
5 open mind throughout the plaintiff's case and realize that  
6 there is another side to the story and not make a decision  
7 in this matter until you've heard from everybody.

8 Thank you.

9 (Excerpt concluded.)  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

## C E R T I F I C A T E

I, Richard D. Ehrlich, a Registered Merit Reporter and Certified Realtime Reporter, certify that the foregoing is a true, complete, and accurate transcript of the proceedings ordered to be transcribed in the above-entitled case before the Honorable J.P. Stadtmueller, an jury, in Milwaukee, WI, on March 25, 2019.

s/Richard D. Ehrlich March 26, 2019

---

Richard D. Ehrlich, Official Court Reporter